Approved for use through 7/81/2008. OMB 0651-002

U.S. Palent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Pepetwork Reduction Act of 1995, no persons are required to respond to a collection of information unless R displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Humber Substitute for Form PTO-676 APPLICATION AS FILED - PART I OTHER THAN (Column 1) (Column 2) SMALL ENTITY OR SMALL ENTITY FOR. NUMBER FILED . NUMBER EXTRA RATE (\$) BASIO FEE FEE (\$) RATE (\$) FEE (8) 67 OFR 1.18(a), (b), or (d) GEARCH FEE OT OFR 1.(G)(), (I), or (III)) EXAMINATION FEE (37 OFR 1.16(o), (p), or (q1) TOTAL CLAIMS 07 OFR 1.18(1) enthus 20 a 05. x 57 NDEPENDENT CLAIMS OR ŧ (87 CFR 1.16(10) minus 3. 🛥 x 200. If the specification and drawings exceed 100 APPLICATION SIZE sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each (37 CFR 1.16(4)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1,16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR-1.160) 180 (es) If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II (Côlumn 1) (Column 2) (Column 3) OTHER THAN SMALL ENTITY OR CLAIMS SMALL ENTIT REMAINING PŘESENT NUMBER PREVIOUSLY RATE (\$) ADDI: AFTER RATE (\$) ADDI-**EXTRA** TIONAL FEE (\$) MENDMENT PAID FOR Total (III) TIONAL Minus FEE (\$) OR kvdependent CFR L16(b) 面 200 Application Size Fee (37, OFR 1.16(s)) OR ٠, FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (77 OFF 1.100) 180 Ų0 OR TOTAL TOTAL ADD'L FEE ADD'L FEE OR (Column 1) (Column 2) (Calumn 3) CLAIMS **GHEST** REMAINING NUMBER PRESENT RATE (\$) ADDI-AFTER REVIOUSL RATE (\$) EXTRA ADDŰ TIONAL FEE (\$) PAID FOR TIONAL Total pr CFR L. (CI)) Minus FEE (\$) OR Independent (37 OFR 1.160.) Minus 8 Application Size Fee (37 CFR 1.16(s)) OR ٠ ـ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (17 OFR 1.160)

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1460.

TOTAL ADD'L FEE

OR:

**OR** 

TOTAL